												_
									plication	or Do	ocket Num	ber
	PATENT A	APPLICATIO Effecti	N FEE DE			ON RECOR	RD 1		09/	84	و کرد	- S
		CLAIMS AS	FILED - (Column		(Colur	mn 2)	SMÅL TYPE	L EN	ITITY	OR	OTHER SMALL I	
Ю	TAL CLAIMS		- 1/				RAT	Ε	FEE	1	RATE	FEE
OI	3		NUMBER F	ILED	NUMBI	ER EXTRA	BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			// min	nus 20= *		X\$ 9)= 		OR	X\$18=		
INDEPENDENT CLAIMS			2 mir	/ minus 3 = *			X40=			X80=		
MULTIPLE DEPENDENT CLAIM PR							_		OR			
16		1.			* 0" :		+13	5=		OR	+270=	
IT '		in column 1 is	•			olumn 2	TOT	AL.	: . ·	OR	TOTAL	
	C	LAIMS AS A (Column 1)	MENDED	(Colu	mn 2)	(Column 3)	SMA	LLE	ENTITY	OR	OTHER SMALL I	
		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total		Minus	**		= 2.50	X\$ 9)=		OR	X\$18=	
	Independent		Minus	***	or a grade of the contract of	= 50-7	X40	 : =			X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDEN	T CLAIM		2.5%	:		OR	**	
							+138		- \	OR	+270=	
	/						ADDIT.	FEE		OR	TOTAL ADDIT: FEE	2 6
	1. Kan 3. San	(Column:1)		(Colu	mn 2) IEST	(Column 3)		, ,				
		REMAINING AFTER AMENDMENT		NUN PREVI	BER OUSLY FOR	PRESENT: EXTRA	RAT	E,	ADDI-1 TIONAL FEE	八金	RATE	ADDI- TIONAL FEE
,	Total		Minus			# 45	X\$ 9)= ·		OR	X\$18=	
	Independent		Minus				X40				X80=	4-25-54 4-19
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	T CLAIM			- -		OR	∧ 00=	
ų.	NY A		The second second		. "	.,	,		,	OR	+270=	
· ·					. ••	ADDIT.	TAL	7* :	OR	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Colu	mn 2) HEST	(Column 3)		``		***		
ENUMENTO		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	11 70 10	Minus	••		=	X\$ 9) <u> </u>		OR	X\$18=	. /
ij	Independent		Minus	T	1. 100		1 1 1 1			! "		

X40=

+135=

ADDIT. FEE

TOTAL

• •		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA						
NO.	Total		Minus	**	=						
M	Independent		Minus	*** Land	=						
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										

If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

AMENDMENT

OR

OR

OR

X80=

+270=

ADDIT. FEE

TOTAL